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UTILITY PATENT APPLICATION TRANSMITTAL

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Address		ENT ADD	LICA	TION	Attorney Dock	et No.	YANG3176/EM	J.s. 024	
Box PATENT APPLICATION Commissioner of Patents					First Named In (or identifier)	ventor	Kuo-Ping YANG	48)/84	
P.O. Box 1450 Alexandria, VA 22313-1450					Total Pages		60	175	
Transmitted herewith is a patent application under 37 CFR 1.53(b).									
Enti	itled:	Learning Device With Page Indicators							
×	■ 1. Submitted herewith are the following:								
		12 pages of specification, including claims and Abstract. 9 sheets of FORMAL drawings (Figs. 1-10). 8 claims. 1 Oath/Declaration signed by each inventor. 1 Application Data Sheet. 1 Assignment of the invention to Kuo-Ping Yang, Taipei, Taiwan, R.O.C., Cover Sheet, and payment of the \$40 recordal fee. 1 certified copy of Taiwan application no. 093104196. Priority is claimed. 1 check in the amount of \$425 (\$385- Filing Fee; \$40- Assignment Recordation Fee).							
⋈	2.	SMALL ENTITY STATUS IS ASSERTED pursuant to 37 CFR 1.27 for this application.							
×	3.	The Commissioner is authorized to credit any overpayment and charge any deficiency in any fees required under 37 CFR 1.16 and/or 1.17, to Deposit Account No. 02-0200.							
	4.	Insert before the first sentence of the specification: This application claims the benefit of provisional application number filed							
	5.	Insert before the first sentence of the specification: This application is a Continuation-in-part of nonprovisional application number filed							
	6.	Other:							
The registered practitioners representing applicant(s) are J. Ernest Kenney, Reg. No. 19,179; Eugene Mar, Reg. No. 25,893; Richard E. Fichter, Reg. No. 26,382; Thomas J. Moore, Reg. No. 28,974; Joseph DeBenedictis, Reg. No. 28,502; and Benjamin E. Urcia, Reg. No. 33,805.									
THE FILING FEE IS CALCULATED AS FO				E IS CALCULATED AS FO	OLLOWS:		Basic Fee:	\$770.00	
Total Claims: 8 - 20 =				- 20 =		0	X \$18 =	\$0.00	
Independent Claims: 1 - 3						0	X \$86 =	\$0.00	
Correspondence Address: BACON & THOMAS, PLLC 2336					4	Multiple Dep	Multiple Dependent Claim (add \$290.00): \$0.0		
625 S	Slaters	Lane, 4 th Fl	oor		CUSTOMER NUMBER		Subtotal:		
Alexandria, VA 22314-1176						50% Re	50% Reduction if Small Entity Status:		
Phone: 703-683-0500 F				Fax: 7	03-683-1080	1080 Total:			
Date:			Name:		5	Signature:			
May 7, 2004		, 2004	Richard E. Fichter		Kiche	Richard E Fichtes			